



**BlueCross BlueShield
Association**

An Association of
Independent Blue Cross
and Blue Shield Plans

1510 G Street, N.W.
Washington, D.C. 20005
Telephone 202.626.4780
Fax 202.626.4833

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

SEP 20 3 43 PM '96

September 20, 1996

Mr. John D. Gibson
Assistant Staff Director
Reports Analysis Division
Federal Election Commission
999 E Street, N.W.
Washington, D. C. 20463

Dear Mr. Gibson:

Pursuant to your letter of September 12, 1996, attached is a
corrected Schedule A for the period May 1 through May 31, 1996.

Sincerely,

Brenda Larsen Becker
Treasurer

cc: Mr. Andrew J. Dodson
Senior Reports Analyst



Official Health Insurance
Sponsor of the 1996
U.S. Olympic Team

SCHEDULE A

ITEMIZED RECEIPTS

05/01/98 through 05/31/98

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 1 OF
FOR LINE NUMBER 12

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

CAREPAC, The Blue Cross and Blue Shield Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>BCBSHawaii 818 Keeaumoku Street Honolulu, HI 96808</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>REFUNDED</p> <p>Aggregate Year-to-Date</p>	<p>Date (month, day, year)</p> <p>05/22/98</p>	<p>Amount of Each Receipt this Period</p> <p>\$2,500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>BCBSIllinois 233 North Michigan Avenue Chicago, IL 60601</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date</p>	<p>Date (month, day, year)</p> <p>05/10/98</p>	<p>Amount of Each Receipt this Period</p> <p>\$334.00</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>BCWesternPennsylvania Post Office Box 10512 Harrisburg, PA 17105</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date</p>	<p>Date (month, day, year)</p> <p>05/10/98</p>	<p>Amount of Each Receipt this Period</p> <p>\$1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>BSPennsylvania 1800 Center Street Camp Hill, PA 17089</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date</p>	<p>Date (month, day, year)</p> <p>05/10/98</p>	<p>Amount of Each Receipt this Period</p> <p>\$1,250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)

\$5,084.00

TOTAL This Period (last page this line number only)

\$5,084.00



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-3

September 12, 1996

Brenda Larsen Becker, Treasurer
CAREPAC, The Blue Cross and Blue
Shield Association Political
Action Committee
1310 G Street NW, 12th Floor
Washington, DC 20005

Identification Number: C00194746

Reference: June Monthly Report (5/1/96-5/31/96)

Dear Ms. Becker:

On August 21, 1996 you were notified that a review of the above-referenced report(s) raised questions as to specific contributions and/or expenditures, and the reporting of certain information required by the Federal Election Campaign Act.

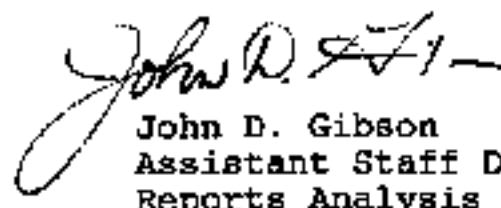
Your August 30, 1996 response is incomplete because you have not provided all the requested information. For this response to be considered adequate, the following information is still required.

-Schedule A of your report discloses an aggregate year-to-date total(s) for a contribution(s) received from BCBS Hawaii which appears to be incorrect. Please amend your report to provide the correct aggregate year-to-date total(s). The Commission notes your refund of the \$2,500 contribution on 6/24/96; however, the aggregate year-to-date total should only reflect the contributions received from THIS entity during 1996 at the time of receipt.

If this information is not received by the Commission within fifteen (15) days from the date of this notice, the Commission may choose to initiate audit or legal enforcement action.

If you should have any questions related to this matter, please contact Andrew Dodson on our toll-free number (800) 424-9530 or our local number (202) 219-3580.

Sincerely,


John D. Gibson
Assistant Staff Director
Reports Analysis Division

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.



Hand Delivered

DATE OF RECEIPT

9-20-96



First Class Mail

POSTMARKED



Registered/Certified Mail

POSTMARKED



No Postmark



Postmark Illegible



Received from the House Office of Records
and Registration

DATE OF RECEIPT



Received from the Senate Office of Public
Records

DATE OF RECEIPT



Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

SES

PREPARER

9-23-96

DATE PREPARED